P. 1

:FOLEY

RECEIVED

CENTRAL FAX CENTER FOLEY & LARDNER 11P
ATTORNEYS AT LAW

NOV 0 9 2004

11250 EL CAMINO REAL, SUITE 200 SAN DIEGO, CA 92130 P.O. BOX 80278 SAN DIEGO, CALIFORNIA 92138-0278 TELEPHONE: 858.847.6700 FACSIMILE: 858.792.6773 WWW.FOLEY.COM

FACSIMILE TRANSMISSION

Total # of Pages 19 (including this page)

| TO: | | PHONE #: | FAX #: |
|-----------|-----------------------------|----------------|----------------|
| 1 | Patent and Trademark Office | | |
| Examiner: | Lyle Alexander | (703) 308-1202 | (703) 872-9306 |
| Art Unit: | 1743 | | |

From: Barry S. Wilson

Date: November 9, 2004

Client/Matter No: 071949-1315

User ID No: 3067

MESSAGE:

Re: U.S. Patent Application No. 09/982,629

Our Ref.:

071949-1315

Attached please find:

- Transmittal (2 pgs.); Duplicate Copy Attached
- Terminal Disclaimer for Patent No. 6,767,510 (3 pgs.);
- Appendix A (3 pgs.);
- Appendix B (2 pgs.);
- Declaration and Power of Attorney (3 pgs.);
- Supplemental Application Data Sheet (3 pgs.);
- Authorization to charge Deposit Acct. No. 50-0872 in the amount of \$110.00.

BEST AVAILABLE COPY

| | It there are any problems with this tran | nsmission or if you have not |
|-------------|--|------------------------------|
| | received all of the pages, pleas | e call 858.847.6700. |
| Operator: | Time Sent: | Return Original To: |
| | | Germaine Sarda |

CONFIDENTIALITY NOTICE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE, THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

023.262157.1

RECEIVED **CENTRAL FAX CENTER**

NOV 0 9 2004

on the date below

Atty. Dkt. No. 071949-1315

CERTIFICATE OF FACSIMILE TRANSMISSION reby certify that this paper is being facsimile transmitted United States Patent and Trademark Office, Alexandria, Virginia

Germaine Sarda

·November 9, 2004

(Date of Deposit)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

5:04PM

Kenneth F. Buechler

Title:

NOV. 9. 2004

DIAGNOSTIC DEVICES AND

APPARATUS FOR THE

CONTROLLED MOVEMENT OF

REAGENTS WITHOUT

MEMBRANES

Appl. No.:

09/982,629

Filing Date:

10/18/2001

Examiner:

Lyle Alexander

Art Unit:

1743

TRANSMITTAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed please find the following:

- [X]Terminal Disclaimer for '510 patent (3 pages)
- [X] Appendix A – Assignment for instant application (3 pages)
- [X] Appendix B - Assignment for U.S. Patent Application No. 09/805,653 (2 pages)
- [X]Declaration and Power of Attorney (3 pages)
- Supplemental Application Data Sheet (3 pages) [X]

Atty. Dkt. No. 071949-1315

[X] The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | | Extra Claims Present | | Rate | | Additional Claims Fee |
|--|-------------------------|--------|------------------------|-------|----------------------------|----------|----------|----|--------------------------|
| Total Claims: | 17 | - | 21 | = | 0 | X | \$18.00 | = | \$0.00 |
| Independents: | 3 | - | 3 | = | 0 | x | \$86.00 | = | \$0.00 |
| First p | oresentation (| of any | Multiple D | epend | lent Claims: | + | \$290.00 | = | \$0.00 |
| , | | | | | CLAIMS | FEE | TOTAL | _ | \$0.00 |
| [X] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d): \$110.00 | | | | | \$110.00 | | | | |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL: | | | | | | \$550.00 | | | |
| [] Small Entity Fees Apply (subtract ½ of above): | | | | | | \$0.00 | | | |
| · | | | | | | TC | TAL FEE |): | \$110.00 |

[X] Please charge Deposit Account No. 50-0872 in the amount of \$110.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 9, 2004 By Gan Wall

FOLEY & LARDNER LLP Customer Number: 30542 Telephone: (858) 847-6722

Facsimile: (858) 792-6773

Barry S. Wilson Attorney for Applicant Registration No. 39,431 NOV 0 9 2004

Atty. Dkt. No. 071949-1315

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Kenneth F. Buechler

Title:

DIAGNOSTIC DEVICES AND

APPARATUS FOR THE

CONTROLLED MOVEMENT OF

REAGENTS WITHOUT

MEMBRANES

Appl. No.:

09/982,629

Filing Date:

10/18/2001

Examiner:

Lyle Alexander

Art Unit:

1743

TRANSMITTAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed please find the following:

- [X] Terminal Disclaimer for '510 patent (3 pages)
- [X] Appendix A Assignment for instant application (3 pages)
- [X] Appendix B Assignment for U.S. Patent Application No. 09/805,653 (2 pages)
- [X] Declaration and Power of Attorney (3 pages)
- [X] Supplemental Application Data Sheet (3 pages)

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being faesimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the data below.

Germaine Sarda

(Printad Name)

November 9, 2004

(Date of Deposit)

DUPLICATE

Atty. Dkt. No. 071949-1315

[X] The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | | Extra Claims Present | | Rate | | Additional Claims Fee |
|--|-------------------------|-------|------------------------|-------|----------------------------|----------|-----------|----------|--------------------------|
| Total Claims: | 17 | - | 21 | = | 0 | χX | \$18.00 | = | \$0.00 |
| Independents: | 3 | - | 3 | = | 0 | x | \$86.00 | = | \$0.00 |
| First p | oresentation | of ar | y Multiple D | epend | lent Claims | ; + | \$290.00 | = | \$0.00 |
| | | | | | CLAIM | is fei | TOTAL | = | \$0.00 |
| [X] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d): \$110.00 | | | | | \$110.00 | | | | |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL: | | | | | | \$550:00 | | | |
| [] | | | Small Entity | Fees | Apply (sub | tract 1/ | of above) |); | \$0.00 |
| | | | | | | TO | TAL FEE |): | \$110.00 |

[X] Please charge Deposit Account No. 50-0872 in the amount of \$110.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date November 9. 2004 By Gam Walk

FOLEY & LARDNER LLP Customer Number: 30542 Telephone: (858) 847-6722

Facsimile: (858) 792-6773

Barry S. Wilson Attorney for Applicant Registration No. 39,431

This Page is Inserted by IFW Indexing and Scanning Operations and is not part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

| Defects in the images include but are not limited to the | e items checked: |
|--|-----------------------------|
| □ BLACK BORDERS | |
| ☐ IMAGE CUT OFF AT TOP, BOTTOM OR SIDES | |
| ☐ FADED TEXT OR DRAWING | |
| ☐ BLURRED OR ILLEGIBLE TEXT OR DRAWING | 81 |
| ☐ SKEWED/SLANTED IMAGES | 1 |
| ☐ COLOR OR BLACK AND WHITE PHOTOGRAPHS | And the second of the Andre |
| GRAY SCALE DOCUMENTS | |
| ☐ LINES OR MARKS ON ORIGINAL DOCUMENT | 12 JUNIOS OTEMAS. |
| ☐ REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POO | OR QUALITY |
| OTHER: | Corres. |

problems checked, please do not report these problems to

the IFW Image Problem Mailbox.